

**Political Organization  
Notice of Section 527 Status**

**Part I**

Name of organization <b>Anthony Williams for State Representative</b>		<b>65 1026958</b>
Mailing address (P.O. Box or number, street, and room or suite number) <b>5455 NW 169 Terrace</b>		
City or town, state, and ZIP code <b>Carol City, FL 33055</b>		
E-mail address of organization <b>RepWilliams2000@aol.com</b>		
Name of custodian of records  <b>Anthony Williams</b>	Custodian's address <b>5455 NW 169 Terrace</b> <b>Carol City, FL 33055</b>	
Name of contact person  <b>Anthony Williams</b>	Contact person's address <b>5455 NW 169 Terrace</b> <b>Carol City, FL 33055</b>	
Business address of organization (if different from mailing address shown above). Number, street, and room or suite number		
City or town, state, and ZIP code		

**Part II**

Describe the purpose of the organization  
**Committee to elect Anthony Williams State Representative in Florida House District 103**

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**Part III**

(see instructions)

Name of related entity	Relationship	Address

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